

City of Flagstaff

Activity Registration Form

Recreation 1702 N. Fourth St. Flagstaff, AZ 86004

Mailing Address: 211 W. Aspen Ave.

Flagstaff, AZ 86001 Phone: (928) 213-2300

Fax: (928) 556-1226

Household Information	n (please prin	t clearly):					
Name:							_
Secondary Contact (if a	pplicable):						-
			City:			Zip:	
ome Phone: Work Phone: E-mail:							
Emergency Contact: (Other Than I	Parent)					
Name:				Home P	hone:		
Participant's Name	Birthdate	Grade	Activity/Program Name	Level	Session Dates	Time	Price
,							\$
							\$
							\$
							\$
							\$
							\$
							\$
	ration form or m		from businesses, individuals, and fund o Flagstaff Recreation Scholarship Dona				
			Recreation S	Scholarship D	onation (any amount is appr	reciated): \$	
						Total \$	
risks of participating include that spinal and neck injuries in these activities. I am awa of the minor child(ren) indiciparticipant(s) in the listed a officers, officials, employees injury or property damage transportation to and from the undersigned acknowled which this registration is subuse my likeness or my mino	e, but are not less, which could be of the nature cated above as activities, the varising as a left activity. If you have the carrising as a left activity. If you have that he should the carrising and volunted and voor child's likened.	ram, sport, limited to, o cause brain e of this act participant undersigned rs from and result of po the has been duntarily an	or activity can be dangerous invested or activity can be dangerous invested ath, serious or permanent injury a damage and/or paralysis, are an tivity and I assume responsibility to the first of the permanent of the permanent of the permanent waives and relinquishes any claim articipation in or receiving instructional advised of the risks and permanent the publications and/or publicity. As the City of liability to personal	olving risks of y, and dama nong the material for myself, it mission by the maless the Con, liability, of the outling of engaging in all photos with the columns of the males of engaging in all photos with the mission of the mission	of injury. I understand age to other parts of my injuries I could received I am a participant, and are City of Flagstaff, the Receives of action, damages, and the City regarding sattle incidental to engaging the activity. I hereby a the activity. I hereby a the remain the property of	body. I use from parass parent of the above creation Do or costs for id activity, ag in the activity of the City of	understand rticipation r guardian we named ivision, its r personal including rtivities for the City to f Flagstaff.

 ${\bf Signature\ of\ Participant\ (Parent\ or\ Guardian\ signs\ if\ participant\ is\ under\ 18)}$

Date